Form North Dakota Individual Income Tax Return (Short Form) For the year January 1 to December 31, 1996, or other taxable year beginning							
For the year Janua		ther taxable year beginning _		1996, and ending			
NOTE:	Your first name and initial		Last name		Your S	Social Security Number	
If information on label	If joint return, spouse's first name and initial		Last name	Last name		Spouse's Social Security Number	
is not correct, please	Mailing address			Apt. No:	(PH) Daytime Phone		
make corrections on label.	City, town or post office, State and Zip Code PLACE LABEL WIT		WITHIN BLOCK		pay estim	required to Yes nated income S for 1996? No	
Filing Status - 1. ☐ Single 3. ☐ Married filing separately - Enter yo (Check only one) 2. ☐ Married filing joint spouse's name			y - Enter your	4. ☐ Head o	of Househo	old	
(Check only one) 2. ☐ Married filing joint spouse's name 5. ☐ Surviving spouse with dependent child Filing Category - 1. ☐ Resident Note: If you moved into or out of North Dakota during 1996, Check either of these boxes Only If It							
(Check only one)		e page 4 for instructions on				ee page 3 of instructions:	
School District -	Enter number	Income Source Code - En		ı ı —	ended retu		
from list on page 12						m attached	
A Complete Copy Of Your Federal Return Must Be Attached							
	usted gross income (from Line 3					Form	
	1040EZ or line H, TeleFile Work		(SX)				
	able income (from Line 37, Form Z or line J, TeleFile Worksheet)		1 1 1 1 1			37-S	
	ome tax liability (See inst. page			r on Lines 3 throu	gh 5 1		
	through 8 and enter the amount						
2. Federal a	adjusted gross income (From Lin	e A above)	(SH)		2	MARI TO	
3. Interest on U.S. obligations (Residents only) (See instructions)(SN)					3	MAIL TO: STATE TAX	
4. Nonresidents Only: (Attach Schedule NR) (See instructions)					4		
5. Other (Identify) (See instructions) (ST)				5	■ 1600 E. RLVD. AVE. I		
6. Total (Add Lines 3, 4, and 5)				6	DISMARCE, ND		
8. Line 7 divided by Line 2 (Round to nearest whole percentage)					% 8	58505-0550	
9. Adjusted Federal income tax liability (Line 1 multiplied by percentage on Line 8) (See instructions)							
10. North Dakota income tax [Line 9 multiplied by .14 (14%)]							
11. Residents enter amount, if any, from Line 7, Schedule 4 (Cr. for income tax paid to another State) (See instr.)							
12. NET TAX LIABILITY (Line 10 less Line 11) (CF)							
13. North Dakota income tax withheld (Attach supporting W-2s and 1099s)					13		
14. 1996 estimated tax payments and amount applied from 1995 return(S&)					14		
15. Total payments (Line 13 plus Line 14)							
If Line 15 Is Greater Than Line 12, Complete Lines 16 Through 20. If Line 15 Is Less Than Line 12, Complete Lines 21 Through 24.							
16. OVERPAY	MENT (Line 15 less Line 12) If	less than \$5, enter zero			(SG) 16	5	
17. Amount of I	Line 16 you wish to apply to 199	7 estimated tax	(S	Q)	17	PLEASE READ	
18. Amount of Line 16 you wish to contribute to Nongame Wildlife Fund(SP)					18	INSTRUCTIONS FOR	
19. Amount of Line 16 you wish to contribute to Centennial Tree Trust Fund(SW)					19		
20. REFUND (Line 16 less Lines 17, 18, and 19) If less than \$5, enter zero							
21. TAX DUE (Line 12 less Line 15) If less than \$5, enter zero					(SZ) 21		
22. Voluntary contribution to Nongame Wildlife Fund (Only if tax due on Line 21) (SU)					22		
23. Voluntary contribution to Centennial Tree Trust Fund (Only if tax due on Line 21)(SY)					23		
24. BALANCE DUE (Line 21 plus Lines 22, 23 and, if applicable, 25) Pay to STATE TAX COMMISSIONER 25. Total interest from Form 400-UT (See instructions) (SO)							
					25		
I declare under the penalties of North Dakota Century Code § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return. For Privacy Act Information, see inside front cover of instruction booklet.							
X G'			□ OPR	PLEASE DO NOT V	VRITE IN 1	THIS SPACE	
Your Signature		Date I					
Spouse's Signature (if joint return)		Date	"Buy North Dakota				
Signature of Preparer of	other than Taxpayer	Date	Products"				
28700	~ -						